

## UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S)

Kotzin, et al.

**GROUP ART UNIT:** 

APPLN. NO.: 10, 814, 485

**EXAMINER:** 

FILED:

March 31, 2004

**DOCKET NO.:** 

CS23908RL

TITLE: METHOD AND APPARATUS FOR CONTENT MANAGEMENT AND CONTROL

## TRANSMITTAL OF FORMAL DRAWINGS

Honorable Assistant Commissioner for Patents Alexandria, VA. 22313

ATTN: OFFICIAL DRAFTSPERSON

SIR:

Enclosed are seven (7) sheets of formal drawings, sheets 1/7 through 7/7,

FIGS. 1 through 9 for the above-identified application.

Respectfully submitted,

Kotzin, et al.

MOTOROLA, INC.

Customer Number: 20280

David S. Noskowicz

Attorney for Applicants

Reg. No. 55,503

30 SEP 2004 Tel. 847-523-2333



## **TRANSMITTAL** FORM (to be used for all correspondence after initial filing)

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Application Number		
Filing Date	March 31, 2004	
First Named Inventor	Kotzin, Michael et al.	
Group Art Unit		
Examiner Name		
Attomosy Dooleat Number	CCCCCCC	

Total Number of Pages in this Submission 1	1	Attorney Docket Number	CS23	CS23908RL					
ENCLOSURES (check all that apply)									
X Fee Transmittal Form		Assignment Papers (for an Application)			inication to Group				
Fee Attached  Amendment/Reply	X Drawing(s)  Licensing-Related papers			Appeal Communication to Boa of Appeals and Interferences Appeal Communication to Gro					
After Final		Petition		{Appeal Notice, Brief, Reply Brief} Proprietary Information					
Affidavits/Declaration(s)		Petition to Convert to a Provisional Application		Status Letter with appropriate copies					
Extension of time Request	Power of Attorney, Revocation, Change of Correspondence			Other Enclosure(s) (please identify below)  Response to Restriction Requirement  Associate Power of Attorney  RCE					
Express Abandonment Request	Address								
Information Disclosure Statement		Terminal Disclaimer			of Notice to File Missing Parts				
Certified Copy of Priority Documents		Request for Refund							
Response to Missing Parts/		CD, Number of CDs							
Incomplete Application  Response to Missing Parts Under 37 CFR 1.52 or 1.53	Rei	iidiks							
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Firm or David S. Noskowicz				Registration No.	55,503				
Signature		$\wedge \rangle$		•					
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		ATE OF TRANSMITTAL							
I hereby certify that this correspondence is being United States Postal Service with sufficient posta Commissioner for Patents, P.O. Box 1450, Alexa	ige the	ereon, as first-class mail, in a	n enve	lope addressed to:	deposited with the				
Typed or printed name Jun	E	Edwards							
Signature	2	dwards		Date 0	9/30/04				

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1 2/				Com	plete i	f Known		
FEE TRANSMITTAL	Application Number							
	Filing Date		March 31, 2004					
Patent fees are subject to annual revision	First Named Inventor		Kotzin, Michael et al.					
Applicant claims small entity status. See 37 CFR 1.27	Examiner Name							
	Group Art U	nit						
TOTAL AMOUNT OF PAYMENT (\$) 0	Attorney Do	cket No		CS23	3908R	L		
METHOD OF PAYMENT (check all that apply)	)			FE	E CAL	CULATION (continued)		
Check Credit card Money Order Other None		3. ADD			11			
X Deposit Account:		Larg Enti			nall tity			
Deposit Account Number 502117		Fee	Fee	Fee	Fee			
Deposit Account Name Motorola, Inc.		Code	(\$)	Code	(\$)	Fee Description		
The Director is authorized to: (check all that apply)		1051	130	2051	65	Surcharge – late filing fee or cath		
X Credit any over	erpayments	1052 1053	50 130	2052 1053	25 130	Surcharge – late Provisional filing Non-English specification		
X Charge any additional fee(s) during the pendency of this applicat	tion	1812	2520	1812	2520	For filing a request for ex parte Reexamination		
Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.		1804	920°	1804	920°	Requesting publication of SIR prior to Examiner action		
		1805	1840°	1805	1840*	Requesting publication of SIR after Examiner action		
FEE CALCULATION		1251 1252	110 420	2251 2252	55 210	Extension for reply within first month		
		1253	950	2253	475	Extension for reply within second month  Extension for reply within third month	-	
1. BASIC FILING FEE		1254	1480	2254	740	Extension for reply within fourth month		
		1255	2010	2255	1005	Extension for reply within fifth month		
Large Entity Small Entity Fee Fee Fee Fee		1401 1402	330 330	2401 2402	165 165	Notice of Appeal		
	e Paid	1403	290	2403	145	Filing a brief in support of an appeal Request for oral hearing		
1001 770 2001 385 Utility filing fee		1451 1452	1510 110	1451 2452	1510 55	Petition to institute a public use proceeding Petition to revive – unavoidable	-	
1002 340 2002 170 Design filing fee		1453	1330	2453	665	Petition to revive - unintentional		
1003 530 2003 265 Plant filing fee 1004 780 2004 385 Reissue filing fee		1501 1502	1330	2501	665	Utility issue fee (or reissue)		
1004 780 2004 385 Reissue filing fee 1005 160 2005 80 Provisional filing fee		1502	480 640	2502 2503	240 320	Design issue fee Plant issue fee		
		1460	130	1460	130	Petitions to the Commissioner		
SUBTOTAL (1) (\$) 0		1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
2. EXTRA CLAIM FEES		1806	180	1806	180	Submission of IDS		
Previously Extra Fee from Paid** Claims below	Fee Paid	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
Total Claims - 20 = X 18	=	1809	770	2809	385	Filing a submission after final		
Independent Claims - 3 = X 86	=	1810	770	2810	385	rejection (37 CFR § 1.129(a)) For each additional invention to be		
Multiple Dependent 280	=	1010	770	2010	303	examined (37 CFR § 1.129(b))		
Large Entity Small Entity Fee Fee Fee Fee		1801	770	2801	385	Request for Continued Examination (RCE)		
Code (\$) Code (\$) Fee Descriptio	n	1802	900	1802	900	Request for expedited examination		
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3		Other fee	(specify)			of a design application		
1203 280 2203 140 Multiple dependent claim, if not paid		Outer les	(opcoir)					
1204 84 2204 42 * Reissue independent claims over or	riginal patent							
1205 18 2205 9 'Reissue claims in excess of 20 and o	over original							
SUBTOTAL (2) (\$) 0 **or number previously paid, if greater; For Reissues, see above.		SUBTOTAL (3) (\$) 0 * Reduced by Basic Filing Fee Paid						
SUBMITTED BY	`					Complete (if applicable)	_	
Name (Print/Type) David S. Noskowicz	1 /.	Registr	ation N	o. §	5,503	Telephone 847-52	3-2333	
Signature	7					ate 30 SEP 2004	1	
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